

DEPARTMENT OF HEALTH SERVICES

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July 30, 1991

Letter No.: 91-67

TO: All County Welfare Directors
All County Administrative Officers

SUBJECT: EDWARDS V. KIZER QUESTIONS AND ANSWERS

REFERENCE: ACWDL 90-06 and 90-53

Since the implementation of the Edwards v. Kizer judgment, counties have requested clarification on a variety of issues. In an effort to resolve those issues, a statewide Edwards Task Force was created and subsequently met on May 22 and May 29, 1991, in Northern and Southern locations. The consensus at these meetings was that counties require specific questions answered and issues addressed. Further, they must be provided with comprehensive procedures. Enclosed are those questions and issues which arose from the meetings together with the State's response. Comprehensive Edwards procedures will be released as soon as they are available. Since there have been no substantial changes to MEDS because of Edwards, there is no need to update the MEDS manual.

If you have any Policy questions about Edwards, contact RaNae Dunne at (916) 324-4955. For questions regarding MEDS issues, contact Bonnie Kinkade at (916) 322-2777.

Sincerely,

ORIGINAL SIGNED BY

Frank S. Martucci, Chief
Medi-Cal Eligibility Branch

Enclosures

cc: Medi-Cal Liaisons
Medi-Cal Program Consultants

ENCLOSURE 1

Policy Questions and Answers

Question 1. Should counties always send out the MC 210E? When should counties send?

Answer 1. Counties should only send the MC 210E when 1) the JA2 (AFDC/FS Statement of Facts) contains insufficient information to complete a Medi-Cal Only determination; or 2) counties experience logistical problems which make it difficult to obtain the AFDC case file timely.

Question 2. It is felt that the MC 210E does not contain adequate information to complete a Medi-Cal Only determination. Will the MC 210E be revised to contain more information?

Answer 2. Revising the MC 210E is under consideration. We are currently evaluating the necessity for revising the form.

Question 3. Can you make a determination of Medi-Cal eligibility off the JA 2?

Answer 3. Yes. If there is sufficient information.

Question 4. What information should the AFDC worker photocopy for the Medi-Cal worker?

Answer 4. If AFDC workers are willing to make photocopies, the JA 2 and current, appropriate verifications are required to make a Medi-Cal Only determination. Appropriate verification would include income and resource statements and the linkage factor.

Question 5. Is an actual case review required prior to terminating a case for failure to return a MC 210E?

Answer 5. Yes. The AFDC case file (or photocopied documents) may contain sufficient information to complete a Medi-Cal determination. Failure to return the MC 210E should not mean automatic discontinuance. However, if the AFDC case file does not contain sufficient information and the MC 210E is not returned timely, Medi-Cal should be terminated with timely and adequate notice. (Refer to All County Welfare Directors Letter (ACWDL) 90-06, page 5 -- "MC 210 Statement of Facts".)

Question 6. When requesting further instructions when a family member moves from the home, where do you send the MC 210E?

Answer 6. Counties should send the MC 210E to the new address (if available) and give the recipient a deadline of at least 20 days from the new mailing date to return the form to the county. (Refer to ACWDL 90-06, page 4.)

Question 7. What forms are required to send with the MC 210E?

Answer 7. Counties are required to send the MC 216, MC 217, and MC 218, along with the MC 210E. As soon as the MC 210 Coversheet is available as a separate document in the warehouse, counties should start using it instead of the MC 216, MC 217 and MC 218. Counties are NOT required to send the MC 13. The written statement of alien status obtained during a beneficiary's application for Aid to Dependent Families with Children (AFDC) is sufficient documentation of citizenship/alien status for purposes of Medi-Cal eligibility. The only time an MC 13 would be required is if there are additional people added to the case.

Question 8. On many occasions an AFDC case is discontinued based on reported eligibility for SSI (such as presumptive SSI eligibility) and then the recipient is never approved. The recipient remains a 38 because the county is unaware that they were not eligible for SSI unless they come back and reapply for AFDC. What can counties do to identify these recipients and delete them from aid code 38?

Answer 8. In this situation, we would prefer that the case be left on MEDS under an AFDC aid code and monitored by an AFDC worker until SSI/SSP eligibility has been created on MEDS by SSA. Otherwise, the case, when terminated by the county, will appropriately be placed in Edwards. The case should be monitored by the Edwards coordinator. SSI eligibility, if it exists, will be created on MEDS automatically. Should you encounter problems in this area, contact your MEDS network liaison.

ENCLOSURE 2

Systems Questions/Issues and Answers

Question 1. When are the Edwards v. Kizer Redetermination Tracking Reports (Aging Reports) being sent to the counties?

Answer 1. The reports were sent to all counties the beginning of July.

Question 2. Counties have reported problems using MEDS transactions when those counties have created their own Edwards records. (This was reported by Case Data System Counties when they used certain Eligibility Status Action Codes (ESAC)). When will this be problem be fixed?

Answer 2. The Medi-Cal Eligibility Branch and Data Systems Branch are investigating this problem. If you have evidence of this problem, please phone your MEDS liaison or the MEDS hotline.

Issue 3. Counties reported that Transitional Medi-Cal Cases (Aid Codes 39 and 59) were turning into Edwards cases at MEDS renewal without any county change to the records.

Answer 3. We have evidence that when there is a discrepancy identified by reconciliation, the resulting EW30 for a TMC record with a future termination date gets rejected. This causes a hold to be placed in pending and, if the error is not worked before the next MEDS renewal, the record changes to Edwards. We are preparing a problem report on this.

Issue 4. When counties fail to do file clearance (checking MEDS for a previous record on a beneficiary) before picking up that beneficiary on an Inter-County Transfer (ICT) with a pseudo-Social Security Number, MEDS generates a new record, thereby leaving the sending county with an ongoing Edwards case and the new county with a duplicate record.

Answer 4. We request counties do a file clearance before generating an ICT. This will eliminate the problem of duplicate records and extra Edwards cases.

Issue 5. Counties would like the Department of Health Services to create another MEDS discontinuance code which will discontinue a potential Edwards MEDS record if the record is transferred to another county.

Answer 5. The Edwards v. Kizer court order precludes the counties/state from discontinuing an Edwards beneficiary before a Medi-Cal only redetermination has been made.

Question 6. Will the State automatically discontinue Edwards when the Edwards beneficiary has been placed in a program such as 185 Percent or 200 Percent (these appear on MEDS on the special program screen)?

Answer 6. Yes. A request for the modifications to MEDS to allow these discontinuances will be forwarded to Data Systems Branch by July 1991.

Issue 7. A county reported that when they terminated eligibility on the Medi-Cal members of a family the AFDC cash members of the family were changing to Edwards.

Answer 7. The probable cause would be the use of a whole case termination (EW35) where all members of a family have the same serial and FBU number. Unless your county has different serial or FBU numbers to identify the AFDC cash vs. Medi-Cal members, you should never use a whole case transaction. Individual EW30 or EW40's must be used for each member being terminated.

Question 8. When will another Electronic Mail message be sent on Foster Care?

Answer 8. This will be done by July 1991.

Issue 9. Counties requested tapes of Edwards worker alerts to match against their county data bases.

Answer 9. This will be done in the near future. We will solicit input from counties as to the data elements required.

Issue 10. Some counties wish to eliminate MEDS Worker Alert #9530 MEDS Established Edwards - Medi-Cal Determination Needed and/or MEDS Worker Alert #9534 - Second Edwards Month - Check Medi-Cal Determination Status.

Answer 10. These messages are optional. Counties may use E-Mail Form 53 to add or delete these optional messages (Note: it will take 6-8 weeks from the time the E-Mail is sent).

Question 11. When will the Edwards alert sort error be fixed?

Answer 11. This problem was fixed at June Renewal in May.

Issue 12. Counties reported that non-AFDC Aid Codes were going into Edwards.

Answer 12. There was a problem at one time if future AFDC-eligibility was reported and then changed to a hold status prior to renewal. That problem was fixed at the end of November 1990. If you have evidence of this problem, please report it to your MEDS liaison or the MEDS hotline.

Issue 13. Counties are requesting a change in the new Aging Report and Worker Alerts to indicate if the listed case changed to Edwards due to a hold or a termination reason.

Answer 13. We are not planning to do this at this time. Counties can, however, request this information be on the optional Edwards tape (See #9 above).

Issue 14. Counties are requesting that reconciliation not bypass aid code 38, but treat it like other aid codes at reconciliation.

Answer 14. The reason we are bypassing 38's is to continue to protect holds, not reflected on the county file when the reconciliation tape is created, from being erroneously reactivated. We are looking into enhancing MEDS update logic to allow reconciliation to recognize and reactivate records that changed to 38 from a terminated status as opposed to a hold status.

Issue 15. Some counties have requested that MEDS allow a county record to update MEDS during a reconciliation if only 2 out of 3 header data elements (COID, MEDSID, Birthdate) matched (MEDS would be updated with the third).

Answer 15. This was discussed further at the Northern and Southern California Meds Advisory Group (CMAG) meetings in June. DHS and many counties were not in favor of this due to the probability that MEDS information would be degraded.

Issue 16. Counties desired specific funding for a MEDS specialist in each county.

Answer 16. Counties should call the State DHS' County Administration Office to relay your concerns. However, the state's budget crisis may preclude any extra funding. Note: counties do have discretion on how they allot their current funding.

Issue 17. Counties wish to change the name MEDS (Medi-Cal Eligibility Data System) to a more all-inclusive acronym. This would hopefully make AFDC and other entities feel more involved in the system.

Answer 17. If counties have any ideas on a more appropriate name, please let your MEDS liaison know.

Issue 18. Some counties want the State to send an automatic MC 210E at renewal when AFDC has been discontinued.

Answer 18. It is unlikely the state will do this due to several factors:

1. Many counties don't like this idea as there are many Edwards records which are changed back to AFDC at the beginning of each month (but after renewal). The unnecessary forms will generate extra workload.

2. It is unlikely this solution fits into the spirit of the court order, i.e., many of the MC 210E's sent out would be unnecessary.
3. Having the State send out MC 210E's would cause a major cost addition to the State Medi-Cal printing/postage budget.